Rational Pharmaceutical Management Plus (RPM Plus) Program – Introduction of the SCMS (Supply Chain Management System) Consultant and Follow Up on RPM Plus Activities Côte D'Ivoire Trip Report – April 13 – 20, 2006

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About RPM Plus

The Rational Pharmaceutical Management Plus (RPM Plus) Program, funded by the U.S. Agency for International Development (cooperative agreement HRN-A-00-00-00016-00), works in more than 20 developing countries to provide technical assistance to strengthen drug and health commodity management systems. The program offers technical guidance and assists in strategy development and program implementation both in improving the availability of health commodities—pharmaceuticals, vaccines, supplies, and basic medical equipment—of assured quality for maternal and child health, HIV/AIDS, infectious diseases, and family planning and in promoting the appropriate use of health commodities in the public and private sectors.

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Introduction of the SCMS Consultant – Follow Up on RPM Plus Activities

Acronyms

ART anti-retroviral treatment

ARV anti-retroviral

CDC U.S. Center for Disease Control and Prevention

CI Côte d'Ivoire

COP Country Operational Plan

DIPE Information, Planning and Research Unit of the Ministry of Health

DMIS drug management information system
EGPAF Elizabeth Glaser Pediatric AIDS Foundation

GF Global Fund

HIV/AIDS Human immunodeficiency virus/acquired immune deficiency syndrome

MOH Ministry of Health

MOU Memorandum of understanding
MSH Management Sciences for Health
NGO Non-Governmental Organization

PEPFAR President's Emergency Plan For AIDS Relief
PSCM Partnership for Supply Chain Management
PSP-CI Public Health Pharmacy - Central Medical Store

RETROCI Retrovirus project-Côte d'Ivoire

RPM Plus Rational Pharmaceutical Management Plus Program

SCMS Supply Chain Management System

SIMPLE Information system for managing drugs used in epidemics

SOW Scope of work

STRA Short Term Resident Advisor

USAID United States Agency for International Development

TA technical assistance USG U.S. Government

Introduction of the SCMS Consultant – Follow Up on RPM Plus Activities

Background

Since July 2004, the RPM Plus program has been assisting PSP-CI in interventions to strengthen its institutional capability and optimize resources to support the Presidential Emergency Plan for AIDS Relief (PEPFAR). RPM Plus technical assistance (TA) centers mainly on human capacity development at the central, district and institutional levels of the health system. RPM Plus supported PSP-CI in building a national core of trainers in drug management, preparing a drug management curriculum and providing training to more than 75 pharmacists, midwives and nurses from HIV/AIDS accredited centers (ART centers). To facilitate the availability of data on ARV management and HIV/AIDS related commodities, RPM Plus installed the ARV dispensing tool "SIMPLE-1" in 16 accredited centers and trained more than 40 ARV managers in the use of the tool. Another ARV management manual tool was also introduced and disseminated to track the expiration dates of ARVs at service delivery points. In March 2006, RPM Plus tested and disseminated an automated tool for assisting pharmacists from 20 health facilities in quantification of ARVs needed for HIV/AIDS case management. In coordination with the Information, Planning and Research Unit of the Ministry of Health (DIPE), a monthly report form including a set of drug management indicators were tested in ART centers and integrated into the health management information system at the national level. Collection and treatment of information on ARV management and ART patients are conducted jointly by RPM Plus and staff from the ARV management units created by/at PSP-CI. Plans are to make a monitoring and evaluation group at PSP-CI operational for coordinating the collection and treatment of information from the field.

Jointly with the Elizabeth Glaser Pediatric AIDS Foundation (EGPAF), RPM Plus has been working to ensure the expansion of SIMPLE-1 to facilities receiving technical support from EGPAF. An assessment of computer capacity at ART centers was conducted, and EGPAF started to provide some centers with computers for tracking HIV/AIDS patients and follow up on ARV management.

Following the award by the US Government of the "Supply Chain Management System" (SCMS) project to the Partnership for Supply Chain Management (PSCM), a reconnaissance visit was conducted in Côte d'Ivoire in February 2006 by the PSCM team and USAID/Washington to assist the USG team/Côte d'Ivoire in interventions to improve the HIV/AIDS commodity management system in support of the Emergency Plan expansion. Since TA activities will shift to SCMS under the country operational plan 2006 (COP06), it was agreed at the end of the visit that SCMS will identify a consultant to allow a rapid start up of activities and provide assistance in response to Côte d'Ivoire's immediate needs. MSH made this request an immediate priority and identified Scott McKeown, a Program Manager from the Leadership and Management Center at MSH, to play this role while the Human Resource service at RPM Plus/Washington is trying to identify candidates to fill the long term advisor position.

Purpose of Trip

Michael Derosena traveled to Côte d'Ivoire from April 13 to April 20, 2006 along with the SCMS consultant Scott McKeown to follow on RPM Plus activity development with support from the current RPM Plus local advisor. This visit was also conducted to assist Scott McKeown

in setting up the SCMS office and ensure a smooth transition of pharmaceutical management TA from RPM Plus to SCMS.

The Scope of Work was as follows:

- Review progress in the use and expansion of SIMPLE-1 and the Expiry tracking sheet at ART accredited centers;
- Discuss plan with PSP-CI for monitoring and facilitating the collection and treatment of ARV management information from ART centers;
- Investigate progress in the signature process of the memorandum of understanding related to the implementation of ORION;
- Meet with DIPE to discuss strategies for producing and disseminating the drug management tools that have recently been adopted by the MOH to be used in all health facilities;
- Meet with EGPAF to review progress in collaboration activities including training in the use of SIMPLE-1, and strategies for reinforcing the ARV management information system;
- Meet with the SCPA Law Office Dogué Yao & Associates to review progress in the registration process of MSH in Côte d'Ivoire;
- Introduce the SCMS short term technical advisor to RPM Plus work with PSP-CI and assist in the preparation of SCMS implementation in Côte d'Ivoire;
- Brief upon arrival and/or debrief prior departure USAID officials, as requested.

Activities

• Review progress in the use and expansion of SIMPLE-1 and the Expiry tracking sheet at ART accredited centers;

A draft of the quarterly report covering the period from January to March 2006 was submitted to RPM Plus/Washington by the local team assisting the ARV management unit at PSP-CI. The report was produced with data from 16 ART centers where SIMPLE-1 is currently operational. No major problem was encountered by the users on the field. This visit offered an opportunity to discuss the accuracy of data collected, analysis and interpretation of the findings with the computer specialist Mohamed Sidibé and Moise Touhon, the RPM Plus consultant seconded to PSP-CI. A standard format was reviewed and an agreement was reached on the final presentation of the report. The team also discussed the plan for extending SIMPLE-1 to 4 new ART facilities during the next quarter.

With Moise, we also conducted a visit at the ART center PPH Cocody where the Expiry tracking sheet was reviewed with Dr. TIA Raphael, the pharmacist in charge, who offered an interesting demonstration of the use of the sheet. All information was accurate. Although the ARV pharmacy was well organized, one can see the accumulation of empty boxes on the floor that needed to be discarded. Also, ARV medicines are stored on open shelves and are not secured in locked cabinets or locked in areas accessible only by the pharmacist in charge. A visit to the central warehouse of PPH Cocody that supplies all services of the facility revealed numerous problems and a total absence of good drug management principles. The ART pharmacist explained that he has been struggling unsuccessfully with his boss to improve the storage conditions. In fact, this situation is not exclusive to PPH Cocody. Pictures of other ART warehouses taken by Moise and Mohamed call for immediate actions in all 16 ART centers visited. Since the RPM Plus budget is shrinking and TA being shifted to SCMS, the warehouse situation in ART centers was identified among the top priorities for SCMS. The USG team and Dr. Souaré, the PSP-CI Director, were informed of the need for immediate appropriate interventions.

• Discuss plan with PSP-CI for monitoring and facilitating the collection and treatment of ARV management information from ART centers;

This activity is one of the critical elements for follow up on training provided to HIV/AIDS personnel and SIMPLE-1 users. In spite of great enthusiasm and warm appreciation during the training workshops, participants are not often motivated to initiate changes in drug management practices and general behavior in managing their warehouses. Moreover, district pharmacists who are mandated to oversee drug management activities in the remote areas do not have resources and logistics to cover health facilities under their responsibilities on a regular basis. Therefore, the information needed for planning purposes is not available, and if/when available, not often accurate for decision making. Collection, treatment and analysis of data on ARV management are being made jointly by the RPM Plus local advisor Moise Touhon, and the PSP-CI computer specialist Mohamed Sidibe. As SIMPLE-1 is being extended to more ART centers and training provided accordingly to users, RPM Plus highlighted the need for PSP-CI to have a structured team to cover this activity on the field. PSP-CI hired a new pharmacist to work at the

statistic unit and he is on schedule to be part of the MIS team. The plan is to have two pharmacists to cover ART in Abidjan, and the district pharmacists to assist with facilities at the regional level. The need to get DIPE involved in supervision and follow up on the field was also discussed. Activities with DIPE are presented in another section.

• Investigate progress in the signature process of the memorandum of understanding related to the implementation of ORION;

The installation process of ORION was initiated in February 2005 with the visit of the MSH/ORION team in Côte d'Ivoire to investigate PSP-CI's specific needs, computer technology, and human resources required for the implementation of ORION. Following that visit and during the process of implementation, it appeared necessary to have of a memorandum of understanding (MOU) signed between MSH/RPM Plus and PSP-CI, as well as a license agreement with 3iInfotech. The draft of the MOU sent to PSP-CI in July 2005 not only experienced delays in analysis and feedback, but PSP-CI faced a legal situation with another company which was contracted to build some software for drug management at the central warehouse back in February 2004. At USAIDs request, ORION was put on hold since PSP-CI could not move forward with the MOU. Dr. Souaré promised to ensure follow up with the Cabinet of the Minister and speed up this process as soon as the MOU is signed.

• Meet with DIPE to discuss strategies for producing and disseminating the drug management tools recently adopted by the MOH to be used in all health facilities;

DIPE is the central service of the MOH that has the mandate to collect and treat health information and produce reports for decision-making. For sustainability, RPM Plus conducted numerous meetings with the staff, and proposed new drug management tools to be incorporated into the health information system to DIPE.

DIPE was very open to collaboration and agreed upon a set of indicators to be used in monthly and quarterly reports at ART centers. RPM Plus proposed to assist DIPE in the preparation and dissemination of such tools, as well as appropriate training for the users. This activity is scheduled to begin with ART centers for testing the indicators followed by the expansion nationwide.

 Meet with EGPAF to review progress in collaboration activities including training in the use of SIMPLE-1, and strategies for reinforcing the ARV management information system;

Following the recommendations of the SCMS team visiting Côte d'Ivoire in February, RPM Plus has met with EGPAF to follow up on the use of SIMPLE-1 in ART centers supported by EGPAF or scheduled to receive computers from EGPAF. In December 2004, RPM Plus assisted EGPAF with the training of 20 users of the ARV dispensing tool "SIMPLE-1" from centers in the EGPAF network. The plan was to look for better coordination mechanisms for collecting data on ARV management at health facilities and sharing information on the patient regimen and ARV consumption and availability. RPM Plus met with the EGPAF team to mainly discuss data for

the quantification exercise being conducted at the time of the visit in coordination with PSP-CI and the Global Fund. The problem of availability and accuracy of data resurfaced, especially because EGPAF and PSP-CI/GF were, in most of the cases, using the same health facilities and the same patients as references for calculation and scale up. RPM Plus has been facilitating the streamlining of communications between EGPAF and PSP-CI for transmission of information related to ARV management. As recommended by RPM Plus, a direct communication line was established between the PSP-CI Director and the EGPAF representative. This approach was fruitful, and most of the communication bottlenecks between EGPAF and PSP-CI have now been resolved.

• Meet with the SCPA Law Office Dogué Yao & Associates to review progress in the registration process of MSH in Côte d'Ivoire;

In light of SCMS activities, the registration of MSH in Côte d'Ivoire is a key step for a smooth development of its interventions, especially when hiring personnel, opening bank accounts, procuring pharmaceuticals, and clearing HIV/AIDS products at customs, etc. MSH has been using services of the SCPA Law Office to speed up the process. However, the recent political changes seem not to be a facilitating factor, and the lawyer is struggling with the national authorities to move forward with this process. It was suggested that having a letter from the MOH acknowledging MSH's work in Côte d'Ivoire could be used at least for opening a bank account and initiating the process of hiring local staff. This letter is still pending while the MSH file is in archives at the Ministry of Interior. RPM Plus facilitated a meeting between Scott and the lawyer for un update, but also to review the current procedures in Côte d'Ivoire for hiring personnel and opening a bank account. The lawyer confirmed that all requested documents were submitted through the regular channel for registration of a NGO in Côte d'Ivoire. He insisted on the fact that this is a long process and expected that with the letter from the Minister of Health, some actions can be initiated. To facilitate this process, MSH has sent a document letter to Dr. Souaré to submit to the Cabinet of the Minister, detailing MSH work in general and its work in Côte d'Ivoire, as suggested by the lawyer. An acknowledgment of this work by the MOH is a master piece for the registration process.

• Introduce the SCMS short term technical advisor to RPM Plus work with PSP-CI and assist in the preparation of SCMS implementation in Côte d'Ivoire;

Following the official launch of SCMS, Côte d'Ivoire was among the first countries to be visited by the Partnerships team. RPM Plus assisted PSP-CI in the preparation of the visit and contributed to activities in the SOW of the team. As requested, RPM Plus worked with the MSH human resources office to identify a short term resident advisor (STRA) for preparing SCMS mobilization in Côte d'Ivoire. A meeting was conducted at PSP-CI by Dr. Souaré to officially introduce Scott the PSP-CI staff. This meeting was in fact part of the weekly management meetings held at PSP-CI with directors and other staff responsible for coordinating pharmaceutical activities in the technical units of the organization. Following a brief introduction by RPM Plus, Scott was presented to the audience where he explained his role during the transition time, progress on recommendations from the SCMS initial visit, and the role of SCMS in reinforcing PSP-CI capacities to support the Emergency Plan.

An official introduction to EGPAF was also facilitated by RPM Plus. Scott was able to meet with the EGPAF Representative Joseph Essombo and his staff where some key management issues related to ARVs were discussed with the team. The SCMS consultant took this opportunity to investigate the possibility of establishing a temporary office in the same building. EGPAF offered its assistance for contacting the landlord and also to look for other possibilities closer to the PSP-CI headquarters and RETROCI office of operations.

Since RPM plus activities will shift under SCMS, RPM Plus worked closely with the SCMS consultant on the field as well as the SCMS team in Washington to ensure a smooth transition of ongoing activities and coordination of planned new activities.

The RPM Plus local pharmacist consultant Moise Touhon continues to work closely with the SCMS consultant and is providing assistance where/when requested for the opening of the SCMS office.

• Brief upon arrival and/or debrief prior departure USAID officials, as requested.

Scott was presented to the USG team and his SOW was reviewed and clarified for the USG team. In the absence of Jyoti/USAID, a meeting was held with Monica/CDC at the end of the mission. The key point was the immediate assistance to district and institutional warehouses to improve infrastructure and the storage conditions. Monica recommended that SCMS take charge of this activity. The USG team received debriefing on meetings with Dr. Souaré and technical discussions with PSP-CI staff and partners.

Next Steps

- Continue the extension of SIMPLE-1 to other ART centers with computer technology;
- Collect and analyze data on ARV management (SIMPLE-1 quarterly report)
- Prepare transition of RPM Plus to SCMS;
- Assist in the opening of the SCMS office and launch of operations;
- Provide TA to SCMS as needed

Conclusion

This visit was an excellent opportunity to initiate steps for addressing drug management issues at district and institutional levels in a more coordinated way. PSP-CI has taken actions to reinforce the monitoring and evaluation team and extend field activities to supportive supervision with the involvement of district pharmacists. In fact, the district pharmacists are also in need of assistance

and immediate interventions for improving the storage conditions, allowing them to better play their role of decentralized warehouses supplying ART centers of their catchment area. While transitioning to SCMS, technical assistance to PSP-CI and the PEPFAR will continue to be ensured by RPM Plus through the local pharmacist advisor and staff from the office in Washington. Among immediate and priority activities should be the strengthening of pharmacists and managers capacities in order to meet the criteria of good storage conditions and improve daily practices of drug management. Since the focus is ARV, it is expected that the implementation of a phased approach will lead to the improvement of drug management practices in general.